Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			5				Γ	RATE	FEE		RATE	FEE	
FOR N			NUMBER F	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	5 min	us 20=	* (2		X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	/ mir	nus 3 =	. 0			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	-	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" i						olumn 2	L	TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II										10	OTHER		
		(Column 1)		(Colu		(Column 3)	_	SMALL E	NTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	-	=		X40=		OR	X80=		
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	T CLAIM		1	+135=		OR	+270=		
							L	TOTAL		00	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDIT. PEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=] [X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤	105		1	.070		
							l	+135= TOTAL	_	OR	+270= TOTAL		
							,	ADDIT. FEE		OR	ADDIT. FEE		
 	hr	(Column 1) CLAIMS			imn 2) HEST	(Column 3)	۱.		,				
AMENDMENT C		REMAINING AFTER AMENDMENT	1	NUM PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	<u></u>	X40=	-	OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	IT CLAIN	1	 L	.125			+270=	<u> </u>	
	· If the entry in colu	Ĺ	+135= TOTAL		OR	TOTAL							
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

								Application or Docket Num					ber
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								9/747.780					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE FEE		FEE	1	RATE	FEE
FO			NUMBER I	FILED	NUMBER EXTRA			BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			min	us 20=	*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			mi	inus 3 = *				X42=			1	X84=	
		DENT CLAIM PF						742-			OR		
								+140=			OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOT	٩L		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMA	LL I	ENTITY	·OR	OTHER SMALL I	
NTA		CLAIMS REMAINING AFTER AMENDMENT	THE PERSON WITH THE PERSON OF	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	* 110	Minus	** 2	20	= /		X\$ 9)=		I OR	X\$18=	/
MEN	Independent	* 3	Minus	*** 3	3	=/] ′	X42	= /		OR	X84=	
¥	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN	T CLAIM				/				
						•)=.		OR	+280= TOTAL	
	•							ADDIT.	TAL FEE		OR	ADDIT. FEE	
_	angular angular suamar 13 kama kululun angular	(Column 1) CLAIMS			ımn 2) HEST	(Column 3)	١,				1		
IENT B		REMAINING AFTER AMENDMENT		NUN PREVI	MBER NOUSLY D FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u>\S</u>	Total	*	Minus	**		=		X\$ 9) =		OR	X\$18=	
AMENDM	Independent	*	Minus	***		=]	X42	<u> </u>		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT C								-4.46	_			+280=	· · · · · · · · · · · · · · · · · · ·
								+140	J= TAL		OR	TOTAL	
					•			ADDIT.			OR	ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3	. .	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
QM	Total	*	Minus	**		=		X\$ 9)=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42	 !=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										l OH		
			La			aluma 3		+140			OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													